



Send in orders to:

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CUSTOMER ORDER FORM-COMMERCIAL DOORS AND OPENERS

DATE: _____ COMPANY NAME: _____ _____ _____ _____	SHIP TO: _____ _____ _____ _____	PURCHASE ORDER# _____ JOB NAME _____ _____
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ITEM	QTY	WIDTH	HEIGHT	MODEL#	COLOUR	GLAZING (if thermo circle panel # & size)	RADIUS	JAMBS	UNIT PRICE	TOTAL PRICE
A						<input type="checkbox"/> thermo pane; 1 2 3 4 5 6 ALL (25 x 12) (24 x 6) <input type="checkbox"/> full view	<input type="checkbox"/> 12" <input type="checkbox"/> 20" <input type="checkbox"/> 15" <input type="checkbox"/> 32"	<input type="checkbox"/> wood <input type="checkbox"/> steel		
B						<input type="checkbox"/> thermo pane; 1 2 3 4 5 6 ALL (25 x 12) (24 x 6) <input type="checkbox"/> full view	<input type="checkbox"/> 12" <input type="checkbox"/> 20" <input type="checkbox"/> 15" <input type="checkbox"/> 32"	<input type="checkbox"/> wood <input type="checkbox"/> steel		
C						<input type="checkbox"/> thermo pane; 1 2 3 4 5 6 ALL (25 x 12) (24 x 6) <input type="checkbox"/> full view	<input type="checkbox"/> 12" <input type="checkbox"/> 20" <input type="checkbox"/> 15" <input type="checkbox"/> 32"	<input type="checkbox"/> wood <input type="checkbox"/> steel		

WEATHERSTRIP: yes no **COLOUR:** Commercial Aluminum white grey bronze sandstone almond hunter green brown black cream (sahara tan) woodgrain

OPTIONS:

ITEM	TRACK	LIFT	MISC.
A	<input type="checkbox"/> 2" bracket mount <input type="checkbox"/> 2" angle mount <input type="checkbox"/> 3" angle mount	<input type="checkbox"/> standard lift <input type="checkbox"/> hi-lift _____ in. <input type="checkbox"/> full vertical lift	<input type="checkbox"/> pitched track _____ on 12" Floor to ceiling measurement _____ in. <input type="checkbox"/> solid shaft <input type="checkbox"/> pusher springs <input type="checkbox"/> bumper springs
B	<input type="checkbox"/> 2" bracket mount <input type="checkbox"/> 2" angle mount <input type="checkbox"/> 3" angle mount	<input type="checkbox"/> standard lift <input type="checkbox"/> hi-lift _____ in. <input type="checkbox"/> full vertical lift	<input type="checkbox"/> pitched track _____ on 12" Floor to ceiling measurement _____ in. <input type="checkbox"/> solid shaft <input type="checkbox"/> pusher springs <input type="checkbox"/> bumper springs
C	<input type="checkbox"/> 2" bracket mount <input type="checkbox"/> 2" angle mount <input type="checkbox"/> 3" angle mount	<input type="checkbox"/> standard lift <input type="checkbox"/> hi-lift _____ in. <input type="checkbox"/> full vertical lift	<input type="checkbox"/> pitched track _____ on 12" Floor to ceiling measurement _____ in. <input type="checkbox"/> solid shaft <input type="checkbox"/> pusher springs <input type="checkbox"/> bumper springs

OPENERS:

MANUFACTURER	MODEL	H/P	VOLTS	PHASE	SOLENOID BRAKE	CHAIN SPREADER	CHAIN SPREADER
<input type="checkbox"/> LiftMaster <input type="checkbox"/> Lynx <input type="checkbox"/> Linear	<input type="checkbox"/> trolley <input type="checkbox"/> jackshaft	<input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> other	<input type="checkbox"/> 115 <input type="checkbox"/> 460 <input type="checkbox"/> 230 <input type="checkbox"/> 575	<input type="checkbox"/> single <input type="checkbox"/> three	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no

SPECIAL INSTRUCTIONS:

_____	Options Total	
_____	Sub-Total	
_____	H.S.T.	
_____	Total :	